

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION | T-G | | 7/10/01 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | Z 4 | 1120 | 8-22-01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
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| Final | |
| Original | |
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If more than 150 claims or 10 actions
stapl additional sheet here

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901
8/22/01